OIP PART B - FEE(S) TRANSMITTAL

	this form, together with	th applicate of		Cor P.C Ale	all Stop ISSUE mmissioner fo D. Box 1450 exandria, Virg 1) 273-2885	r Patents	450	
INSTRUCTIONS: This fi appropriate. All further co indicated unless corrected maintenance fee notification	orm should be used tran prespondence including the below or directed otherwise ons.	smitting the ISSU Member advance or in Block 1, by (a	JE FEE and rders and not a) specifying	PUBLICATION of manew correspondent	ON FEE (if requaintenance fees voondence address;	ired). Blocks 1 vill be mailed to and/or (b) indic	through 5 sl the current cating a sepa	nould be completed where correspondence address as rate "FEE ADDRESS" for
	TE ADDRESS (Note: Use Block 1 for 7590 09/22/2005	any change of address)		Fee(:	s) Transmittal. Th	is certificate can il paper, such as	not be used t an assignme	or domestic mailings of the or any other accompanying nt or formal drawing, must
1320 MAIN STRI COLUMBIA, SC		RBOROUGH	I, LLP	I her State addre trans	Cereby certify that thes Postal Service vessed to the Mai	tificate of Maili is Fee(s) Transm vith sufficient po I Stop ISSUE F TO (571) 273-28	ng or Trans nittal is being stage for firs EE address 85, on the d	mission g deposited with the United st class mail in an envelope above, or being facsimile ate indicated below.
/15/2005 RMEBRAH1 000	00025 10072644				Martha Boy			(Depositor's name)
FC:2501 FC:1504 FC:8001	700.00 OP 300.00 OP 30.00 OP				Matt December	12, 2005	Cont	(Signature)
APPLICATION NO.	FILING DATE		FIRST NAME	DINVENTOR		ATTORNEY DO	CKET NO.	CONFIRMATION NO.
10/072,644	02/08/2002		Victor G		<del> </del>	16139/0		3274
APPLN. TYPE	SMALL ENTITY	ISSUE F	ee ee	print to	CATION FEE	TOTAL FEE	e) DHE T	DATE DUE
	YES	\$700				\$100	<u> </u>	
nonprovisional	, TES	\$700	'		\$300	\$100	,	12/22/2005
	EXAMINER							
		ART UN			SUBCLASS			
Shah, i	KAMINI S	2142		702-	-033000			
SHAH, I  I. Change of correspondence CFR 1.363).  Change of correspon Address form PTO/SB/I  "Fee Address" indica	KAMINI S  ce address or indication of "Fo	2142 ee Address" (37 Correspondence	2. For prin (1) the na or agents ( (2) the nar registered 2 registere	ting on the pa mes of up to DR, alternative me of a single attorney or as	-033000 atent front page, lis 3 registered patenely, e firm (having as a gent) and the nam neys or agents. If	t attorneys 1.  member a 2.  es of up to		Mullins & Scarborough l
SHAH, I  1. Change of correspondence CFR 1.363).  Change of correspon Address form PTO/SB/I  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	KAMINI S  ce address or indication of "Fordence address (or Change of 122) attached.  ation (or "Fee Address" Indication	2142 see Address" (37 Correspondence ution form	2. For prin (1) the na or agents ( (2) the nar registered 2 registere listed, no r	702- ting on the pa mes of up to DR, alternativ ne of a single attorney or a d patent attor name will be p	-033000 atent front page, lis 3 registered patenely, c firm (having as a gent) and the nam neys or agents. If orinted.	t attorneys 1.  member a 2.  es of up to		
SHAH, I  I. Change of correspondent CFR 1.363).  Change of correspon Address form PTO/SB/I  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME ANI PLEASE NOTE: Unless	ce address or indication of "Fo dence address (or Change of 122) attached. ation (or "Fee Address" Indica or more recent) attached. Use	2142 ee Address" (37 Correspondence ution form e of a Customer E PRINTED ON T	2. For prin (1) the na or agents ( (2) the na registered 2 registered isted, no r	ting on the pa mes of up to DR, alternativ ne of a single attorney or as d patent attorname will be pa (print or type	-033000  atent front page, lis 3 registered patenely, e firm (having as a gent) and the namneys or agents. If orinted.  e)	member a es of up to no name is 3	Riley	& Scarborough 1
SHAH, I  1. Change of correspondence CFR 1.363).  Change of correspon Address form PTO/SB/I  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME ANI PLEASE NOTE: Unless	ce address or indication of "Fordence address (or Change of 122) attached.  ation (or "Fee Address" Indication (or more recent) attached. Use D RESIDENCE DATA TO B is an assignee is identified bein 37 CFR 3.11. Completion of	2142 Dee Address" (37 Correspondence Lation form Let of a Customer E PRINTED ON Tellow, no assignee of this form is NOT	2. For prin  (1) the na or agents ( (2) the na registered 2 registered isted, no r  THE PATENT data will app T a substitute	ting on the pa mes of up to DR, alternative me of a single attorney or and d patent attorname will be pa (print or type ear on the pa for filing an a	-033000  atent front page, lis 3 registered patenely, e firm (having as a gent) and the namneys or agents. If orinted.  e)	member a 2. es of up to no name is 3. ee is identified l	Riley	& Scarborough 1
SHAH, I  I. Change of correspondence CFR 1.363).  Change of correspon Address form PTO/SB/I  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth i  (A) NAME OF ASSIGN	ce address or indication of "Fordence address (or Change of 122) attached.  ation (or "Fee Address" Indication (or more recent) attached. Use D RESIDENCE DATA TO B is an assignee is identified bein 37 CFR 3.11. Completion of	2142 see Address" (37 Correspondence stion form to of a Customer E PRINTED ON Tolow, no assignee of this form is NOT	2. For prin  (1) the na or agents ( (2) the na registered 2 registered isted, no r  THE PATENT data will app T a substitute	ting on the pa mes of up to DR, alternativ ne of a single attorney or at d patent attor name will be pa (print or type ear on the pa for filing an a	-033000  atent front page, lis 3 registered patenely, e firm (having as a gent) and the nam neys or agents. If orinted.  e)  tent. If an assign ssignment.	member a 2. es of up to no name is 3. ee is identified l	Riley	& Scarborough 1
SHAH, I  1. Change of correspondent CFR 1.363).  Change of correspon Address form PTO/SB/I  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME ANI PLEASE NOTE: Unles recordation as set forth i  (A) NAME OF ASSIGN  Universi  Please check the appropriate	ce address or indication of "Fordence address (or Change of 122) attached.  ation (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO B is an assignee is identified bein 37 CFR 3.11. Completion of 12EE.  Lty of South Car et assignee category or category.	2142 The Address" (37  Correspondence stion form to fa Customer  E PRINTED ON To assigned of this form is NOTO (But to a customer)  (Boolina  Tries (will not be printed to a customer)	2. For prin (1) the na or agents ( (2) the na registered 2 registered iisted, no n THE PATENT data will app T a substitute (b) RESIDENC	ting on the pames of up to DR, alternative ne of a single attorney or and dipatent atme will be pamer on the pafor filing an a E: (CITY and COlumeter):	-033000  atent front page, list of a registered patent ely, efirm (having as a gent) and the namneys or agents. If printed.  e)  tent. If an assign ssignment.  d STATE OR COUMED IN THE	member a es of up to no name is 3  ee is identified I	Riley	& Scarborough 1
SHAH, I  1. Change of correspondent CFR 1.363).  Change of correspon Address form PTO/SB/I  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME ANI PLEASE NOTE: Unles recordation as set forth i  (A) NAME OF ASSIGN  Universi  Please check the appropriate  4a. The following fee(s) are	ce address or indication of "Fordence address (or Change of 122) attached.  ation (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO B is an assignee is identified bein 37 CFR 3.11. Completion of 12EE.  Lty of South Car et assignee category or category.	2142 The Address" (37  Correspondence stion form to fa Customer  E PRINTED ON To assigned of this form is NOTO (But to a customer)  (Boolina  Tries (will not be printed to a customer)	2. For prin (1) the na or agents ( (2) the nai registered 2 registered 1 registered 2 registered 3 registered 4 registered 5 RESIDENC	ting on the pames of up to DR, alternative ne of a single attorney or and do patent atme will be pamer on the pamer of filing an anales: (CITY and COlumeter):	atent front page, list registered patent ely, efirm (having as a gent) and the nam neys or agents. If orinted.  e)  tent. If an assign assignment.  d STATE OR COUMBIA, SC  Individual County C	member a 2 es of up to no name is 3 mee is identified I	Riley	& Scarborough 1
SHAH, I  1. Change of correspondent CFR 1.363).  Change of correspon Address form PTO/SB/I  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME ANI PLEASE NOTE: Unles recordation as set forth i  (A) NAME OF ASSIGN  Universi  Please check the appropriate A. The following fee(s) are	ce address or indication of "Fordence address (or Change of 122) attached.  ation (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO B is an assignee is identified bein 37 CFR 3.11. Completion of IEE.  Lty of South Car et assignee category or category enclosed:	2142 De Address" (37 Correspondence Lition form To fa Customer  E PRINTED ON To Plow, no assignee of this form is NOT  (B  Olina  Tries (will not be printed)	2. For prin (1) the na or agents ( (2) the nar registered 2 registered 12 registered 2 registered 2 registered 13 red 14 red 15 red 16 red 16 red 17 red 18	ting on the pames of up to DR, alternative ne of a single attorney or against attorname will be proposed for filing an after (COlumeter):	atent front page, list 3 registered patent ely, 2 firm (having as a gent) and the namely or agents. If printed.  1 STATE OR COUNTY INDICATE OR COU	member a 2 2 es of up to no name is 3 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Riley	& Scarborough
SHAH, I  1. Change of correspondent CFR 1.363).  Change of correspon Address form PTO/SB/I  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME ANI PLEASE NOTE: Unles recordation as set forth i  (A) NAME OF ASSIGN  Universi  Please check the appropriate 4a. The following fee(s) are	ce address or indication of "Fordence address (or Change of 122) attached.  ation (or "Fee Address" Indicator more recent) attached. Use DRESIDENCE DATA TO B is an assignee is identified bein 37 CFR 3.11. Completion of IEE.  Lty of South Car e assignee category or category enclosed:	2142  De Address" (37  Correspondence ation form of a Customer  E PRINTED ON Tollow, no assignee of this form is NOT (Bries (will not be printed to the prin	2. For prin (1) the na or agents ( (2) the nar registered 2 registered 10 registered 2 registered 11 registered 12 registered 13 registered 14 registered 15 RESIDENC 16 registered 16 registered 17 registered 18 registered 19 registered 10 registered 10 registered 10 registered 10 registered 11 registered 12 registered 13 registered 14 registered 15 registered 16 registered 16 registered 17 registered 17 registered 18 r	ting on the pames of up to DR, alternative ne of a single attorney or a quarter attorname will be pamer on the pamer of th	atent front page, list 3 registered patent ely, 2 firm (having as a gent) and the namely or agents. If printed.  1 STATE OR COUNTY INDICATE OF COU	member a 2. es of up to no name is 3. ee is identified l. INTRY)  reporation or other closed. is attached.	Riley  pelow, the do	& Scarborough 1
SHAH, I  1. Change of correspondent CFR 1.363).  Change of correspon Address form PTO/SB/I  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth i  (A) NAME OF ASSIGN  Universi  Please check the appropriate  A. The following fee(s) are X Issue Fee X Publication Fee (No. 1) X Advance Order - # o  5. Change in Entity Status  a. Applicant claims S	ce address or indication of "Fordence address (or Change of 122) attached.  ation (or "Fee Address" Indicator more recent) attached. Use DRESIDENCE DATA TO B is an assignee is identified bein 37 CFR 3.11. Completion of IEE.  ty of South Car is assignee category or category enclosed:  small entity discount permitter of Copies 10  (from status indicated above MALL ENTITY status. See 3	2142  Dee Address" (37  Correspondence attion form to of a Customer  E PRINTED ON To the state of this form is NOT (Bries (will not be printed to the printe	2. For prin (1) the na or agents ( (2) the nar registered 2 registere listed, no r  THE PATENT data will app Γ a substitute b) RESIDENC  THE PATENT  A substitute  Payment of  KA check in Payment  The Dire Deposit Acco	ting on the pames of up to DR, alternative ne of a single attorney or against the pame will be part of the pame will be part or type against the pame will be part of the pame will be pame wi	atent front page, list a registered patent ely, a firm (having as a gent) and the nameys or agents. If printed.  The state of the fee (s) is end. If form PTO-2038 and the fee (s) is end. If form PTO-20	member a 2. es of up to no name is 3. ee is identified I	r private gro	Execution of the state of the s
SHAH, I  1. Change of correspondent CFR 1.363).  Change of correspon Address form PTO/SB/I  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth i  (A) NAME OF ASSIGN  Universi  Please check the appropriate  A. The following fee(s) are X Issue Fee X Publication Fee (No. 1) X Advance Order - # o  5. Change in Entity Status  a. Applicant claims S	ce address or indication of "Fordence address (or Change of 122) attached.  ation (or "Fee Address" Indicator more recent) attached. Use DRESIDENCE DATA TO B is an assignee is identified bein 37 CFR 3.11. Completion of IEE.  ty of South Car is assignee category or category enclosed:  small entity discount permitter of Copies 10	2142  Dee Address" (37  Correspondence attion form to of a Customer  E PRINTED ON To the state of this form is NOT (Bries (will not be printed to the printe	2. For prin (1) the na or agents ( (2) the nar registered 2 registere listed, no r  THE PATENT data will app Γ a substitute b) RESIDENC  THE PATENT  A substitute  Payment of  KA check in Payment  The Dire Deposit Acco	ting on the pames of up to DR, alternative ne of a single attorney or against the pame will be part of the pame will be part or type against the pame will be part of the pame will be pame wi	atent front page, list a registered patent ely, a firm (having as a gent) and the nameys or agents. If printed.  The state of the fee (s) is end. If form PTO-2038 and the fee (s) is end. If form PTO-20	member a 2. es of up to no name is 3. ee is identified I	r private gro	Execution of the state of the s
SHAH, I  1. Change of correspondent CFR 1.363).  Change of correspon Address form PTO/SB/I  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth i  (A) NAME OF ASSIGN  Universi  Please check the appropriate  A. The following fee(s) are X Issue Fee X Publication Fee (No. 1) X Advance Order - # o  5. Change in Entity Status  a. Applicant claims S	ce address or indication of "Fordence address (or Change of 122) attached.  ation (or "Fee Address" Indicator more recent) attached. Use DRESIDENCE DATA TO B is an assignee is identified bein 37 CFR 3.11. Completion of IEE.  ty of South Car is assignee category or category enclosed:  small entity discount permitter of Copies 10  (from status indicated above MALL ENTITY status. See 3	2142  Dee Address" (37  Correspondence attion form to of a Customer  E PRINTED ON To the state of this form is NOT (Bries (will not be printed to the printe	2. For prin (1) the na or agents ( (2) the nar registered 2 registere listed, no r  THE PATENT data will app Γ a substitute b) RESIDENC  THE PATENT  A substitute  Payment of  KA check in Payment  The Dire Deposit Acco	ting on the pames of up to DR, alternative ne of a single attorney or against the pame will be part of the pame will be part or type against the pame will be part of the pame will be pame wi	atent front page, list a registered patent ely, a firm (having as a gent) and the name neys or agents. If orinted.  The state of the fee (s) is end. Form PTO-2038 and authorized by chapter of the fee (s) is end. Form PTO-2038 and authorized by chapter claiming SMAL ply any previously e applicant; a register.	member a 2. es of up to no name is 3. ee is identified I	r private gro d fee(s), or ce an extra co	Execution of the state of the s

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450. Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450. Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.





ATTORNEY DOCKET NO: 16139/09021

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of	)	Examiner:
VICTOR GIURGIUTIU	)	Shah, Kamini S.
Serial No.: 10/072,644	)	
Serial No.: 10/0/2,844	)	Art Unit: 2142
Filed: February 8, 2002	)	
•	)	Conf. No: 3274
Title: IN-SITU STRUCTURAL HEALTH	)	
MONITORING, DIAGNOSTICS AND	)	
PROGNOSTICS SYSTEM UTILIZING	)	
THIN PIEZOELECTRIC SENSORS	)	

## LETTER

MS Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## Dear Sir:

Enclosed herewith are Issue Fee Transmittal Form PTOL-85 and our check in the amount of \$1,030.00 for payment of the Issue Fee and patent copies.

Please charge any additional fees required hereby or credit any overpayment to our deposit account no. 50-1196.

Respectfully submitted,

NELSON MULLINS RILEY & SCARBOROUGH

**dylig** N Killen Reg. No. 35,218 P. O. Box 11070

Columbia, SC 29211-1070 Telephone: (803) 255-9382

Facsimile:

(803) 255-9831

I hereby certify that this correspondence and any referenced attachment and/or fee are being deposited with the United States Postal Service as first class mail in an envelope addressed to: MS Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on December 12, 2005.

Martha Boynton

(Typed/printed name of person mailing paper or fee)

(Signature of person mailing paper or fee)